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|--|-----------------|---------------|--|
| <b>Issue Classification</b><br> | Application No. | Applicant(s)  |  |
|  | 09/214,140      | KAWASE ET AL. |  |
|  | Examiner        | Art Unit      |  |
|  | Dzung D Tran    | 2633          |  |

| ISSUE CLASSIFICATION                                      |          |   |   |   |                                   |    |    |                             |                         |
|---|----------|---|---|---|-----------------------------------|----|----|-----------------------------|-------------------------|
| ORIGINAL  |          |   |   | CROSS REFERENCE(S)  |                                   |    |    |                             |                         |
| CLASS   | SUBCLASS |   |   | CLASS   | SUBCLASS (ONE SUBCLASS PER BLOCK) |    |    |                             |                         |
| 398   | 129      |   |   | 398   | 131                               | 65 | 22 |                             |                         |
| INTERNATIONAL CLASSIFICATION                              |          |   |   |   |                                   |    |    |                             |                         |
| H   | 0        | 4 | B | 10/08   |                                   |    |    |                             |                         |
| H   | 0        | 4 | J | 14/06   |                                   |    |    |                             |                         |
| H   | 0        | 4 | B | 10/00   |                                   |    |    |                             |                         |
|   |          |   |   | /   |                                   |    |    |                             |                         |
|   |          |   |   | /   |                                   |    |    |                             |                         |
| DZUNG TRAN 03/17/2005<br>(Assistant Examiner) (Date)      |          |   |   | Leslie Pascal<br>LESLIE PASCAL<br>PRIMARY EXAMINER<br>(Primary Examiner) 3-18-05 (Date) |                                   |    |    | Total Claims Allowed: 2     |                         |
| Sharon West 4-4-05<br>(Legal Instruments Examiner) (Date) |          |   |   |   |                                   |    |    | O.G.<br>Print Claim(s)<br>1 | O.G.<br>Print Fig.<br>2 |

| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant |          | <input type="checkbox"/> CPA |          | <input type="checkbox"/> T.D. |          | <input type="checkbox"/> R.1.47 |          |
|--|----------|------------------------------|----------|-------------------------------|----------|---------------------------------|----------|
| Final  | Original | Final                        | Original | Final                         | Original | Final                           | Original |
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